

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial)

A. Geoff Davis 2006

Mailing Address Post Office Box 17192

City State Zip Code
Ft. Mitchell KY 41017-

Purpose of Disbursement

2006 GENERAL

Candidate Name
GEOFFREY C DAVIS

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 04

Disbursement For:
☐ Primary ☐ General
☒ Other (specify) ▼
General

Transaction ID: 60406.E1416

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

5000.00

2006 GENERAL

Full Name (Last, First, Middle Initial)

B. Geoff Davis 2006

Mailing Address Post Office Box 17192

City State Zip Code
Ft. Mitchell KY 41017-

Purpose of Disbursement

2006 PRIMARY

Candidate Name
GEOFFREY C DAVIS

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 04

Disbursement For:
☐ Primary ☐ General
☒ Other (specify) ▼
Primary

Transaction ID: 60406.E1415

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 6

Amount of Each Disbursement this Period

5000.00

2006 PRIMARY

Full Name (Last, First, Middle Initial)

C. Political Hall of Fame PAC

Mailing Address 1717 Dixie Hwy Ste 180

City State Zip Code
Ft Wright KY 41011-2790

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☒ Other (specify) ▼
O

Transaction ID: 60406.E1419

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 0 6

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)